RI SOS Filing Number: 201751245580 Date: 10/6/2017 4:00:00 PM

TOPE

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2017
Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

STANIP
18,117 - 1987 A

1. Entity ID Number	2. Exact name of the Limited Liability Company Metacom LLC						
3. NAICS Code	Brief description of the character of business conducted in Rhode Island						
531110	Real Estate Rental						
5. State of Formation							
Rhode Island							
6. Principal Office Address			City	State	Zıp		
Santino Court			Mahopac	NY	10541		
7. Mailing Address of Limited Li	ability Compa	ny and Name o					
Contact Name Madelyn Early			Contact Title Member	Contact Title Member			
Street Address Santino Court			City Mahopac	State NY	^{Zip} 10541		
8. List ALL managers (names a	nd addresses	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST N	MEMBERS		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
Cily	State	Zip	City	State	Zip		
Manager Name Manager Name							
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
				Check the box to it	ndicate an attachment		
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.							
Under penalty of perjury, I de statements, and that all state.			examined this report, includir true and correct.	ng any accompanyin	g schedules and		
Name of Authorized Person Date							
MADELY, JEARLY Signature of Authorized Person							
Suppliation of Authorized Person							
madily cary SIGN DOCUMENT HILFIR.							
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MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

